



## Women's Treatment Services

### Annual Report to the Utah Legislature, October 2008

#### 2007 Legislative Action

In the 2007 General Session, the Utah State Legislature appropriated \$2,500,600 (ongoing state general funds) to expand substance abuse treatment services for an additional 600 women. Legislative intent language directed the Division of Substance Abuse and Mental Health (DSAMH) and the Division of Child and Family Services (DCFS) to provide a written report to the Health and Human Services Appropriations Subcommittee by the 2008 General Session on the use of the funds, how many individuals were served, the effectiveness of the treatment services, and the fiscal impact on current funding levels for children in state custody. This report has been prepared in response to that requirement.

#### Initial Treatment Outcomes

The initial result of the Legislative action has been to increase the availability and effectiveness of treatment services for women and children throughout Utah. An initial review of treatment results in FY2008 reveals that there was an overall 6.61% increase in admissions from FY2007 to FY2008 and an overall 4.3 % increase in women receiving treatment. Other results indicate that at the end of treatment:

- 86.6% were abstinent from alcohol (National Average is 79.4%);
- 72.9% were abstinent from drugs (National Average is 70.7%);
- there was a 36.8% increase in employment/school attendance (National Average was 13.8%);
- there was a 76.4% decrease in arrests (National Average was 52.4%);

- there was a 43.1% decrease in homelessness (National Average was 26.2%); and
- there was a 13.5% increase in the median length of stay (Statewide Average was 11%).

#### Rationale for Appropriation

Between 1991 and 2006, the number of women who entered the public treatment system increased by 170%. (In 1991, 2,679 women compared to 7,243 in 2006.) During the same time period, male admissions declined by 5% (in 1991, 12,383 men compared to 11,742 in 2006). This growth strained existing resources and created a need to modify existing services to ensure that women were appropriately served.

Much of this growth in female admissions was driven by an increasing number of women using Methamphetamine and other illicit drugs. Methamphetamine is the drug of choice for 46% of women in treatment in their child-bearing years (between 18-35). Methamphetamine users require longer treatment episodes, which lead to increased costs and demand for additional resources.

The vast majority of women entering treatment have dependent children. Nearly three-quarters of women in treatment are mothers and parental drug use often leads to child welfare system involvement. The DCFS reports that 63% of cases where a child was removed from the home in FY07 and 54% in FY08 involved substance abuse. The DCFS estimates that the cost to the State of Utah to keep one child in foster care for one year is about \$33,000. These facts led to the need to develop better treatment options for women with children.

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## Use of Funds

Funding was allocated by the DSAMH in two ways. First, \$827,442 was used to create two new residential facilities where women and their dependent children would live together while in treatment. Second, \$1,623,158 was allocated to the local authorities to develop a full continuum of services ranging from long-term residential to standard outpatient treatment. Funding allocated through both processes required that women from the DCFS receive priority admission to treatment.

## Residential Services

Funding for residential programs was awarded through a competitive bid. Individuals from the DCFS and the DSAMH reviewed proposals and awarded contracts to Southwest Behavioral Health and Weber Human Services. Both programs are operational and admitting clients.

In St. George, Southwest Behavioral Health Services opened the Desert Haven program on November 7, 2007. Legislative funding was used to develop the residential support facility for the Desert Haven. Funding is used for operational expenses and staffing the program. During the first seven months of the program, 17 women and children were served. Services include group and individual therapy, behavioral modification, and gender specific day treatment at the main office of Southwest Behavioral Health Center and skills development at the residential support center in the evenings and weekends. This includes basic daily living skills (hygiene, cooking, cleaning, and food preparation), meal planning, budgeting and shopping, parenting classes, and job seeking skills. Case management services include help for the women to access medical services, housing, employment, vocational rehabilitation, and workforce services.

Weber Human Services opened the Tranquility Home, which added 12 new residential slots that serves between 45 and 60 women and their children per year. Legislative funding provides residential space for women and their children. Substance abuse treatment and other therapeutic interventions at the facility are tailored to meet the specific needs of women.

Relationships, sexual and physical abuse, vocational skills, networking, and parenting skills are specifically addressed. Child care and services for children are provided both on site and at the WHS campus, five blocks away. During the first six months of operation, 39 women and 10 children were served.

## Continuum of Services

DSAMH allocated \$1,623,158 to the local authorities to expand their continuum of services for women. In addition, counties are required to provide a 20% match. The Local Substance Abuse Authorities have used the funding to create new and innovative programming for women. For example:

- Utah County Human Services opened the Promise of Women and Families South Program. This new outpatient treatment program doubled the treatment capacity for this population.
- Summit County established an Intensive Outpatient Program, significantly expanding their continuum of treatment services.
- Weber Human Services established a contract with the Salvation Army increasing their residential capacity by 12 to 20 women.

DSAMH retained 5% of the allocation to be used as incentive money in both fiscal years 2008 and 2009. In order to receive the funding initiatives the Local Authorities had to show improvement of women's treatment services in the following ways.

### *FY2008 Incentive Funding Criteria*

- Ensure that a complete continuum of treatment services are available for women.
  - Develop a plan for expanding services for women with children.
  - Improve collaborative efforts with the Division of Child and Family Services.
  - Develop a specific plan for the incentive allocation funding.
  - Select a women's treatment contact person.
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All 13 of the Local Authorities qualified for the Incentive Funding in FY2008. Each Local Authority included one of the FY2009 incentives in their Area Plan, and the awards were made based on their successful completion.

### ***FY2009 Incentive Funding Criteria***

Women's Treatment Providers were asked to select one of the following options:

- Develop a perinatal group or program.
- Develop a therapeutic child care program.
- Implement women's specific groups.
- Receive women's specific training and certification

Finally, DSAMH developed a State Women's Treatment Provider Committee (initiated on 2/22/08) to encourage collaborative efforts between the local authorities, treatment providers, community partners, and administrators. It also provides training opportunities and the exchange of ideas to improve women's treatment services. This meeting is held on a quarterly basis in different regions of the State.

### **Coordination with DCFS:**

Increased cooperation between the DSAMH and DCFS, as well as improved coordination between the Local Substance Abuse Authorities and local DCFS offices has been a key goal for the program. Initial results are very positive, with a DCFS representative as a member of the Women's Treatment Provider Com-

mittee and DCFS case workers being part of treatment team meetings throughout the State. In FY2008, 583 women with children were referred for Treatment Services by DCFS, demonstrating the need statewide for these services.

### **Outcome Measures Scorecard**

As a result of this initiative, admissions for women went up by 356 in FY2008. DSAMH estimates that in FY2009, when there will be a full year of program operation, the funding will serve a total of 600 women. DSAMH is working to ensure that that women have access to effective treatment in fiscal year 2009 and beyond. Part of that effort is to create an annual comparison of treatment results across the State, summarizing the treatment outcomes from the 13 local authorities. Included as an insert to this report is the first "Women's Treatment Outcome Scorecard." This will be prepared annually to present the results of the Women's Treatment Initiative.

Center	2007 Admissions	2008 Admissions	2008 Percentage of 2007
Bear River	285	318	111.58%
Central	79	112	141.77%
Davis	268	338	126.12%
Four Corners	219	266	121.46%
Northeastern	79	180	227.85%
Salt Lake	2,757	2,803	101.67%
San Juan	3	5	166.67%
Southwest	134	238	177.61%
Summit	48	27	56.25%
Tooele	78	86	110.26%
Utah County	770	623	80.91%
Wasatch Co. - Heber	19	30	157.89%
Weber	562	659	117.26%
<b>Total</b>	<b>5301</b>	<b>5685</b>	<b>107.24%</b>



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# Utah Substance Abuse Treatment Women's Outcomes Scorecard

	Admissions (Initial and Transfer)		Number of Clients Served		Percent of Admissions in Outpatient/OP/Residen tial/Detox		Median Days in Treatment Episode	Percent of Clients with Children		Percent of Clients Referred by DCFS		Number of Final Discharges, excluding Detox		Increased Alcohol Abstinence - Percent increase in those reporting alcohol		Increased Drug Abstinence - Percent increase in those reporting other drug abstinence from admission to discharge		Decreased Homelessness - Percent decrease in homeless clients admission to discharge		Increased Employment - Percent increase in those employed full/part time or student from admit to discharge		Decreased Criminal Justice Involvement - Percent decrease in number of clients arrested prior to admission to discharge	
	FY2007	FY2008	FY2007	FY2008	FY2007	FY2008		FY2007	FY2008	FY2007	FY2008	FY2007	FY2008	FY2007	FY2008	FY2007	FY2008	FY2007	FY2008	FY2007	FY2008	FY2007	FY2008
LSAA																							
Bear River	285	318	461	480	85/15/0/0	78/22/0/0	131	120	46%	44%	6.7%	5.3%	299	286	16.6%	13.6%	14.9%	15.6%	11.7%	31.8%	99.5%	100.0%	
Central Utah	79	112	145	178	100/0/0/0	95/5/0/0	162	105	54%	57%	3.8%	2.7%	80	65	30.8%	4.5%	77.8%	4.6%	19.0%	40.6%	75.6%	61.0%	
Davis County	268	338	396	513	65/12/23/0	64/14/22/0	117	140	67%	72%	7.6%	9.5%	167	263	36.6%	8.9%	31.8%	112.5%	11.6%	5.2%	80.7%	70.1%	
Four Corners	219	266	262	311	70/30/0/0	69/30/1/0	106	69	61%	62%	0.0%	0.0%	162	194	26.9%	29.0%	27.5%	25.7%	-15.3%	-9.0%	61.1%	66.0%	
Northeastern	79	180	108	218	89/11/10/0	86/14/0/0	88	46	72%	71%	28.2%	7.8%	55	72	61.5%	4.0%	60.7%	0.0%	3.5%	61.7%	71.0%	53.3%	
Salt Lake County	2,757	2,803	2,613	2,488	32/25/10/33	33/30/11/26	90	98	55%	54%	5.5%	7.1%	1,406	1,465	14.5%	8.9%	40.4%	33.1%	25.9%	54.3%	70.2%	78.2%	
San Juan County	3	5	6	9	67/33/0/0	80/20/0/0	645	390	100%	87%	33.3%	0.0%	3	3	0.0%	0.0%	0.0%	0.0%	0.0%	-100.0%	*	100.0%	
Southwest Center	134	238	156	251	40/35/25/0	34/47/19/0	107	124	74%	69%	17.3%	13.9%	118	146	31.1%	22.8%	25.6%	104.7%	-3.6%	33.3%	74.4%	74.7%	
Summit County	48	27	91	76	100/0/0/0	93/7/0/0	51	81	31%	39%	4.2%	11.1%	40	50	35.3%	62.5%	9.1%	17.2%	-15.2%	-47.2%	88.5%	83.9%	
Tooele County	78	86	118	123	94/1/5/0	84/14/2/0	75	127	36%	37%	3.8%	10.5%	64	69	71.8%	80.8%	79.2%	140.8%	23.2%	-29.7%	73.2%	79.1%	
U of U Clinic	88	60	137	125	100/0/0/0	100/0/0/0	112	131	53%	58%	0.0%	0.0%	71	62	18.1%	7.5%	15.8%	8.2%	84.7%	86.1%	92.9%	87.6%	
Utah County	770	623	477	463	29/21/40/10	42/28/19/11	27	74	68%	66%	22.2%	18.0%	301	388	16.3%	16.2%	61.6%	29.0%	17.9%	59.9%	77.2%	79.5%	
Wasatch County - Heber Valley	19	30	26	36	90/10/0/0	80/17/3/0	62	53	81%	64%	5.3%	6.7%	11	10	59.8%	-20.0%	-12.5%	14.3%	-12.5%	25.0%	90.0%	*	
Weber Human Services	562	659	727	751	77/17/6/0	67/17/16/0	169	139	58%	60%	6.2%	10.9%	444	495	12.8%	32.8%	27.1%	62.8%	19.9%	41.7%	48.9%	72.1%	
State Average/Total	5,389	5,745	5,612	5,854	47/21/14/18	49/25/11/15	96	109	57%	58%	8.4%	8.6%	3,221	3,578	19.2%	15.3%	35.1%	37.3%	17.6%	36.8%	75.1%	76.4%	

Note: Outcomes exclude detox discharges

**State Total for Clients Served is an unduplicated client count across all modalities and is not a sum of the clients served for the providers listed.**

**Clients served for FY07 will be lower than FY06 due to change in reporting system which provides more accurate numbers.**

**Final Discharges reported for FY2006 are by treatment modality and for FY2007 they are by treatment episode.**

Abstinence, Homelessness, Employment, Criminal Justice are all percentage increase/decrease. This is calculated as difference between the percent at admission and the percent at discharge divided by the admission percentage.

Specific percentages are calculated as follows using FY discharges, excluding assessment only, limited treatment, and detox clients. Valid data does not include unknown or missing:

Abstinence from Alcohol or Drug:

# Abstinence from alcohol (or drugs) 30 days prior to admission regardless of primary problem/Total # with valid substance data.

# Abstinent from alcohol (or drugs) 30 days prior to discharge regardless of primary problem/Total # with valid substance data

Homelessness:

# homeless at admission/Total # with valid living arrangement data

# homeless at discharge/Total # with valid living arrangement data

Employment:

# unemployed at admission/Total # with valid employment data

# unemployed at discharge/Total # with valid employment data

Criminal Justice:

# arrested 30 days prior to admission/Total # with valid arrest data

# arrested 30 days prior to discharge/Total # with valid arrest data

Length of Stay:

Calculated from admission date to date of last contact. Median for all client modalities excluding detox.